# FORM 4

### **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

_	Check this box if no longer subject to	STATEMENT C

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287
Estimated average burden

U obligat	ions may contir tion 1(b).	nue. See		File							ies Exchanç mpany Act o		of 1934	ı		II.	s per response:	0.5	
					2. Issuer Name and Ticker or Trading Symbol Sage Therapeutics, Inc. [ SAGE ]									Relationshi Check all app Direc	olicable)	ng Person(s) to	Issuer Owner		
(Last) (First) (Middle) C/O THIRD ROCK VENTURES, LLC 29 NEWBURY STREET, 3RD FLOOR				06/	3. Date of Earliest Transaction (Month/Day/Year) 06/19/2015									Officer (give title Other (specify below)					
(Street)	N M	Α (	)2116		-   4. lf -   -	Am	nendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line)      Form filed by One Reporting Person     Form filed by More than One Reporting Person				
(City)	(St		Zip)																
4			e I - No			_			quired,	Dis	1	-			ally Owne			7 Notices	
1. Title of Security (Instr. 3)			Date	saction /Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Code (Instr. 8)						nd Securi Benef	icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A (C	) or )	Price	Transa	action(s) 3 and 4)		, ,	
Common	Stock			06/19	/2015				J <sup>(1)</sup>		1,000,00	00	D	\$	0 8,7	773,073	<b>D</b> <sup>(2)</sup>		
Common	Stock			06/19	/2015				J <sup>(3)</sup>		64,607	7	A	\$	0 6	64,607	D <sup>(4)</sup>		
Common	Stock			06/19	/2015				J <sup>(5)</sup>		64,607	7	D	\$	0	0	D <sup>(4)</sup>		
Common	Stock			06/19	/2015				J <sup>(6)</sup>		9,402	9,402 A		\$	0 2	27,330	D		
Common	Stock			06/19	/2015				J <sup>(7)</sup>		9,403		A	\$	0 2	27,331	D		
		Та	ble II - I	Derivat e.g., p	ive S uts, c	ecu alls	urities s, warr	Acqui	ired, D option	ispo s, c	sed of, o	or Be le se	nefic curiti	ially es)	y Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year		4. Transaction Code (Instr. 8)		5. Number of		6. Date Exercis Expiration Dat (Month/Day/Ye		sable and	7. Title Amou Securi Under Deriva	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amo or Num of Shar	ber					
		Reporting Person* ures II, L.P.																	
	RD ROCK	(First) VENTURES, L EET, 3RD FLO		dle)															
(Street)	N	MA	021	16															
(City)		(State)	(Zip)			_													
		Reporting Person*	<u>.Р.</u>																

(City) (State)

1. Name and Address of Reporting Person\*

(Street)
BOSTON

(First)

MA

29 NEWBURY STREET, 3RD FLOOR

(Middle)

02116

(Zip)

TRV GP II, LLC									
(Last)	ast) (First)								
29 NEWBURY STREET, 3RD FLOOR									
(Street)									
BOSTON	MA	02116							
(City)	(State)	(Zip)							
1. Name and Address of Reporting Person*  LEVIN MARK J									
(Last)	ast) (First)								
(Last) (First) (Middle) 29 NEWBURY STREET, 3RD FLOOR									
(Street)									
BOSTON	MA	02116							
(City)	(State)	(Zip)							
1. Name and Address of Reporting Person*  TEPPER ROBERT I									
(Last)	(First)	(Middle)							
29 NEWBURY STREET, 3RD FLOOR									
(Street)									
BOSTON	MA	02116							
(City)	(State)	(Zip)							

#### **Explanation of Responses:**

- 1. Distribution of shares in kind by Third Rock Ventures II, L.P. ("TRV") on a pro rata basis to its partners.
- 2. The shares are directly held by Third Rock Ventures II, L.P. ("TRV"). The general partner of TRV is Third Rock Ventures GP II, L.P. ("TRV GP"). The general partner of TRV GP is TRV GP II, LLC ("TRV GP LLC"). The individual managers of TRV GP LLC, Levin, Starr ("Starr") and Dr. Robert Tepper ("Tepper") and, as such, each of TRV GP, TRV GP LLC, Levin, Starr and Tepper exercises shared voting and investment power over the shares held of record by TRV. Each of the Reporting Persons disclaims beneficial ownership of the shares except to the extent of their pecuniary interest therein, if any.
- 3. TRV GP received shares distributed in kind by TRV on a pro rata basis to its partners.
- 4. The shares are directly held by TRV GP. As such, each of TRV GP LLC, Levin, Starr and Tepper exercises shared voting and investment power over the shares held of record TRV GP. Each of the Reporting Persons disclaims beneficial ownership of the shares except to the extent of its pecuniary interest therein, if any.
- 5. Distribution of shares in kind by TRV  $\ensuremath{\mathsf{GP}}$  on a pro rata basis to its partners.
- 6. Levin received shares distributed in kind by TRV GP on a pro rata basis to its partners.
- 7. Tepper received shares distributed in kind by TRV GP on a pro rata basis to its partners.

#### Remarks:

/s/ Third Rock Ventures II, L.P. by Third Rock Ventures GP II, 06/22/2015 L.P. its general partner by TRV GP II, LLC its general partner /s/ Third Rock Ventures GP II, L.P. by TRV GP II, LLC its 06/22/2015 general partner /s/ TRV GP II, LLC 06/22/2015 /s/ Kevin Gillis by power of 06/22/2015 attorney for Mark Levin /s/ Kevin Gillis by power of 06/22/2015 attorney for Dr. Robert Tepper \*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.